

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name 3DH Hospitality, LLC

2. All other names debtor used in the last 8 years DBA Humo Smokehouse
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 92-3427866

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	1000 N. Rohlwing Road, Suite 13 Lombard, IL 60148 Number, Street, City, State & ZIP Code	1008 S. Harvard Ave. Addison, IL 60101 P.O. Box, Number, Street, City, State & ZIP Code
	DuPage County	Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code

5. Debtor's website (URL) Humosmokehouse.com

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **3DH Hospitality, LLC**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

7225

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check **all** that apply:

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No.

☐ Yes.

If more than 2 cases, attach a separate list.

District

When

Case number

District

When

Case number

Debtor **3DH Hospitality, LLC** Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district? Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? ☒ No ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds Check one:
- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|---|--|

Debtor	3DH Hospitality, LLC	Case number (if known)	
	Name		
	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
	<input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor **3DH Hospitality, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 18, 2024**
MM / DD / YYYY

X /s/ Carolina Diaz

Signature of authorized representative of debtor

Carolina Diaz

Printed name

Title **Manager**

18. Signature of attorney

X /s/ Firas M. Abunada

Signature of attorney for debtor

Date **June 18, 2024**

MM / DD / YYYY

Firas M. Abunada

Printed name

Firas Law, LLC

Firm name

**18927 Hickory Creek Drive, Suite 115
Mokena, IL 60448**

Number, Street, City, State & ZIP Code

Contact phone **815-450-9340**

Email address **fma@firaslaw.com**

6307633 IL

Bar number and State

Fill in this information to identify the case:

Debtor name **3DH Hospitality, LLC**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 18, 2024**

X /s/ Carolina Diaz

Signature of individual signing on behalf of debtor

Carolina Diaz

Printed name

Manager

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **3DH Hospitality, LLC**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **155,171.11**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **155,171.11**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **334,246.00**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **23,472.65**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **392,578.41**

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ **750,297.06**

Fill in this information to identify the case:

Debtor name **3DH Hospitality, LLC**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **JP Morgan Chase Bank****Checking (Business)****2539****\$0.00**

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

Security deposit held by Inland Property Management in the amount of \$15,379.15 (lease for 1000 N. Rohlwing Road, Suite 13, Lombard, IL). Initial deposit was made on or about December 21, 2023, and may be deducted by the landlord for past due rent.

7.1. **about December 21, 2023, and may be deducted by the landlord for past due rent.****\$15,379.15**7.2. **Illinois Department of Revenue (Myllinois Unemployment Insurance Account).****\$1,826.96**

Debtor 3DH Hospitality, LLC Case number (If known) _____
Name

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$17,206.11

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Various open and closed alcohol bottles and containers.	Late April 2024.	Unknown	Liquidation	\$6,800.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$6,800.00

24. **Is any of the property listed in Part 5 perishable?**

- ☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

Debtor 3DH Hospitality, LLC Case number (If known) _____
Name

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Various office supplies such as pens, pencils, paper, stapler, and folders.	\$100.00	Liquidation	\$100.00
	See list of assets attached hereto as Exhibit A, which is incorporated herein.	\$0.00	Liquidation	\$130,465.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software 1 inkjet printer and 2 computers.	\$600.00	Liquidation	\$600.00
	Various Toast handheld point of sale units and 6 Toast stationary point of sale machines attached to the cash registers.	Unknown	Liquidation	Unknown
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$131,165.00
44.	Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.

Debtor 3DH Hospitality, LLC Case number (If known) _____
Name

☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 1000 N Rohlwing Road, Suite 13, Lomard, IL 60148	Lease	\$0.00		\$0.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites Humosmokehouse.com; Humo.Lombard Brauer House (on FaceBook); and Humo Bruaer House (on Instagram).	Unknown	Liquidation	Unknown
62. Licenses, franchises, and royalties State of Illinois Liquor License (Retailer - Expires 12-31-24).	Unknown	N/A	Unknown
Illinois Business Authorization (Certificate of Registration).	Unknown	N/A	Unknown

63. Customer lists, mailing lists, or other compilations

Debtor 3DH Hospitality, LLC Case number (If known) _____
Name

Customer names and email addresses collected when tickets for live events are purchased by and through Eventbrite.com.

Unknown N/A

Unknown

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?

☒ No

☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No

☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

Current value of debtor's interest

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

Spriska. Commercial General Liability, Liquor, and Umbrella insurance. No cash value. Provided by Acord (insurance producer is Southpoint Insurance Agency, Inc.).

Unknown

Accident Fund. Workers Compensation insurance and Employers Liability insurance. No cash value.

Unknown

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Debtor 3DH Hospitality, LLC Case number (If known) _____

Name

Unknown claims, defenses, or counterclaims against
SBBL, LLC, its owners, and officers.

Unknown

Nature of claim

Amount requested

\$0.00

Unknown claims, defenses, or counterclaims against
Accounting4U and or Edree Olson.

Unknown

Nature of claim

Amount requested

\$0.00

Unknown claims, defenses, or counterclaims against
Inland Property Management.

Unknown

Nature of claim

Amount requested

\$0.00

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor 3DH Hospitality, LLC Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$17,206.11	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$6,800.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$131,165.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$155,171.11	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$155,171.11

Case number (if known) _____

☐ Check if this is an amended filing

12/15

1. Do any creditors have claims secured by debtor's property?

☒ Yes. Fill in all of the information below.

Unknown

Unknown

Check all that apply

Debtor **3DH Hospitality, LLC**

Name

Case number (if known)

☒ No

☐ Contingent

☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$334,246.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

SBBL, LLC
258 Parkview Drive
Addison, IL 60101

Line 2.1

Stacey Lynch Law, Inc.
16357 Olcott Ave.
Tinley Park, IL 60477

Line 2.1

WebBank
c/o Toast Capital
215 South State Street, Suite 100
Salt Lake City, UT 84111

Line 2.2

Fill in this information to identify the case:

Debtor name **3DH Hospitality, LLC**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	<p>Priority creditor's name and mailing address</p> <p>Alan Caliendo 808 S. Fairfield Lombard, IL 60148</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Trade debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$207.69	\$207.69
2.2	<p>Priority creditor's name and mailing address</p> <p>Alesa Mueller 610 State Street St. Saint Charles, IL 60174</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Trade debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$628.09	\$628.09

Debtor	3DH Hospitality, LLC	Case number (if known)
	<small>Name</small>	

2.3	Priority creditor's name and mailing address Amy Stevens 1314 Kensington Road, Unit 3482 Hinsdale, IL 60522	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$427.28	\$427.28
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Anna Luciano 258 W Parkview Dr. Addison, IL 60101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,945.96	\$1,945.96
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Ariel Muersch 15556 W 151st St. Homer Glen, IL 60491	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$53.02	\$53.02
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Ava Dill 2840 N 73rd Court, Unit Basement Elmwood Park, IL 60707	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$82.22	\$82.22
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC	Case number (if known)
	<small>Name</small>	

2.7	Priority creditor's name and mailing address Breana Lesser 529 N. Indiana St. Elmhurst, IL 60126	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$268.62	\$268.62
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Brian Gordan 1133 S. Finley Rd., #403 Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$896.47	\$896.47
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Brittany Rocha 707 N. Kenilworth Elmhurst, IL 60126	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$64.85	\$64.85
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Christina Kaplan 617 Plum Grove Rd., 2B Roselle, IL 60172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$344.70	\$344.70
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC		Case number (if known)
	Name		

2.11	Priority creditor's name and mailing address Corinne Dyrda 21W549 North Ave #236 Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$757.79	\$757.79
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Edree Olson 1749 Vantage Drive Shorewood, IL 60404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	Unknown
	Date or dates debt was incurred	Basis for the claim: Trade debt / accounting services		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Elizabeth Bray 890 Sheldon Ct., Unit A Wheaton, IL 60189	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$221.52	\$221.52
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Gina Ligeikis 0138 W. Medill Ave. Melrose Park, IL 60164	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$865.63	\$865.63
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC Name	Case number (if known)
2.15	<p>Priority creditor's name and mailing address</p> <p>Halley Kenyon 547 S. Oakland Ave. Villa Park, IL 60181</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Trade debt</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$212.42 \$212.42</p>
2.16	<p>Priority creditor's name and mailing address</p> <p>IDES Benefit Payment Control Division P.O. Box 4385 Chicago, IL 60680</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number <u>N/A</u></p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Notice Only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>Unknown Unknown</p>
2.17	<p>Priority creditor's name and mailing address</p> <p>Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794</p> <hr/> <p>Date or dates debt was incurred</p> <p>2023</p> <hr/> <p>Last 4 digits of account number <u>7866</u></p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Taxes</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$6,300.00 \$6,300.00</p>
2.18	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101</p> <hr/> <p>Date or dates debt was incurred</p> <p>2023</p> <hr/> <p>Last 4 digits of account number <u>7866</u></p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Taxes</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>Unknown Unknown</p>

Debtor	3DH Hospitality, LLC	Case number (if known)		
2.19	Priority creditor's name and mailing address Jairam Navarez 1450 N First Ave., #4 Addison, IL 60101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$584.20	\$584.20
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.20	Priority creditor's name and mailing address John Bravo 12443 S. Honore St. Riverdale, IL 60827	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600.00	\$600.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.21	Priority creditor's name and mailing address Julian Hernandez 1008 S. Harvard Ave. Addison, IL 60101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$141.56	\$141.56
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.22	Priority creditor's name and mailing address Kevin Cuthbertson 701 W. Sunset Ave. Villa Park, IL 60181	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$75.18	\$75.18
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC		Case number (if known)
	Name		

2.23	Priority creditor's name and mailing address Kevin Tierney 672 Hearth Ln., #206 Carol Stream, IL 60188	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$908.20	\$908.20
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Kresta Ortega 270 Paddock Circle Glendale Heights, IL 60139	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$855.93	\$855.93
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address Lisa Pool 4751 St. Joseph Creek, Apt. 104 Chicago, IL 60632	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$160.75	\$160.75
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Nick Cortese 3880 Wehrman Ave. Schiller Park, IL 60176	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,500.00	\$1,500.00
	Date or dates debt was incurred	Basis for the claim: Trade debt		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC	Case number (if known)
	<small>Name</small>	

2.27	Priority creditor's name and mailing address Pete Tlatenchi 320 27th Avenue Melrose Park, IL 60164	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$336.73	\$336.73
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.28	Priority creditor's name and mailing address Rafael Zamora 735 E Irving Park Rd., Unit E Roselle, IL 60172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$255.96	\$255.96
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.29	Priority creditor's name and mailing address Ray Zukowski 531 W. Pleasant Lane, #2 Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$989.13	\$989.13
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.30	Priority creditor's name and mailing address Samantha Surges 442 San Carlos Rd. Minooka, IL 60447	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$738.27	\$738.27
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt		
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	3DH Hospitality, LLC Name	Case number (if known)
2.31	Priority creditor's name and mailing address Sarah Sitko 1521 Commodore Ct., #1 Schaumburg, IL 60193	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Trade debt
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$69.26 \$69.26
<hr/>		
2.32	Priority creditor's name and mailing address Sean Fennessy 860 Foxworth Blvd., #111 Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Trade debt
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$68.76 \$68.76
<hr/>		
2.33	Priority creditor's name and mailing address Timothy Zak 470 Fawell Blvd., #310 Glen Ellyn, IL 60137	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Trade debt
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$593.06 \$593.06
<hr/>		
2.34	Priority creditor's name and mailing address Trina Medley 1016 S. Edson Ave. Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Trade debt
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,075.42 \$1,075.42

Debtor	3DH Hospitality, LLC	Case number (if known)
	<small>Name</small>	

2.35	Priority creditor's name and mailing address Village of Lombard 255 E. Wilson Avenue Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Unknown Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Utility (Food Tax) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.36	Priority creditor's name and mailing address Village of Lombard 255 E. Wilson Avenue Lombard, IL 60148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Unknown Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Utility (Amusement Tax) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.37	Priority creditor's name and mailing address Vincent Cusiamo c/o Edree Olson Accounting 4 U 1749 Vantage Drive Chicago, IL 60604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$123.82	\$123.82
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.38	Priority creditor's name and mailing address Yoana Tierney 672 Hearth Ln., #206 Carol Stream, IL 60188	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,120.16	\$1,120.16
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	3DH Hospitality, LLC Name _____	Case number (if known) _____
--------	---	------------------------------

3.1	Nonpriority creditor's name and mailing address Abarr 8130 W. 47th St. Lyons, IL 60534 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$757.31 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Accident Fund P.O. Box 40790 Lansing, MI 48901 Date(s) debt was incurred _____ Last 4 digits of account number <u>2066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address Adella Harden 2277 S Grove St Apt 221 Bldg 200 Ypsilanti, MI 48198 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$16,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Alberto Diaz 3516 Saint Paul Ave Bellwood, IL 60104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address AlSCO 2641 S Leavitt Street Chicago, IL 60608 Date(s) debt was incurred _____ Last 4 digits of account number <u>5440</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Breakthru Beverage P. O. Box 809180 Chicago, IL 60680 Date(s) debt was incurred _____ Last 4 digits of account number <u>3407</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$543.07 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Capital One P.O. Box 31293 Salt Lake City, UT 84131 Date(s) debt was incurred _____ Last 4 digits of account number <u>Unknown</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	3DH Hospitality, LLC Name	Case number (if known)
--------	-------------------------------------	------------------------

3.8	Nonpriority creditor's name and mailing address Clara Diaz 412 E. LeMoyne Street Melrose Park, IL 60164 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$22,745.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	--	--

3.9	Nonpriority creditor's name and mailing address Comcast 1701 John F. Kennedy Boulevard Philadelphia, PA 19101 Date(s) debt was incurred ____ Last 4 digits of account number <u>2590</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	---	---

3.10	Nonpriority creditor's name and mailing address ComEd P.O. Box 805379 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number <u>Unknown</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,894.48 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.11	Nonpriority creditor's name and mailing address Eventbrite, Inc. 95th Third Street, 2nd Floor San Francisco, CA 94103 Date(s) debt was incurred ____ Last 4 digits of account number <u>0008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.12	Nonpriority creditor's name and mailing address Harvey Harden 816 Karen Drive Cassville, GA 30123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.13	Nonpriority creditor's name and mailing address Inland Property Mngt 2901 Butterfield Road Oak Brook, IL 60523 Date(s) debt was incurred <u>12-21-23</u> Last 4 digits of account number <u>N/A</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$23,068.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent for 1000 N. Rohlwing Road, Suite 13, Lombard, IL</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
------	--	---

3.14	Nonpriority creditor's name and mailing address Manuel Uribe 1441 N. 9th Ave. Addison, IL 60101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

Debtor	3DH Hospitality, LLC Name _____	Case number (if known) _____
--------	---	------------------------------

3.15	Nonpriority creditor's name and mailing address Maricela Diaz 412 E. LeMoyne Street Melrose Park, IL 60164 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Nicor Gas P.O. Box 5407 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number <u>7825,7291,2641</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,265.28 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Salvador Diaz 412 E. LeMoyne Street Melrose Park, IL 60164 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$182,644.29 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Southern Glazer Wine & Spirits 2971 Collection Center Dr. Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number <u>1290</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$528.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address Southpoint Insurance 15341 S 94th Ave., Ste 100 Orland Park, IL 60462 Date(s) debt was incurred _____ Last 4 digits of account number <u>3291,0651,2066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,176.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address Specialty Risk of America P.O. Box 959220 Saint Louis, MO 63195 Date(s) debt was incurred _____ Last 4 digits of account number <u>3291</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Village of Lombard 255 E. Wilson Avenue Lombard, IL 60148 Date(s) debt was incurred _____ Last 4 digits of account number <u>Unknown</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility (Water)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **3DH Hospitality, LLC** Case number (if known) _____
Name

3.22	Nonpriority creditor's name and mailing address Whittingham Meats 4134 W 127th Street Alsip, IL 60803 Date(s) debt was incurred _____ Last 4 digits of account number 8111,9797,0317,0977	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service Contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,554.39
------	---	---	-------------------

3.23	Nonpriority creditor's name and mailing address Wilfredo Bravo 3420 W. North Ave. Chicago, IL 60647 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,400.00
------	--	---	-------------------

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Comcast P.O. Box 809180 Chicago, IL 60680	Line <u>3.9</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	ComEd P.O. Box 6111 Carol Stream, IL 60197	Line <u>3.10</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	IDES P.O. Box 19300 Springfield, IL 62794	Line <u>2.16</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Internal Revenue Service 1220 SW 3rd Ave., Ste. G044 M/S0175 Fairview, OR 97024	Line <u>2.18</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	Nicor Gas P.O. Box 0632 Aurora, IL 60507	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	<div style="background-color: #f2f2f2; padding: 2px; margin-bottom: 5px;">Total of claim amounts</div> <table border="0"> <tr> <td style="width: 5%;">5a.</td> <td style="width: 5%;">\$</td> <td style="width: 90%; text-align: right;">23,472.65</td> </tr> <tr> <td>5b.</td> <td>+</td> <td style="text-align: right;">392,578.41</td> </tr> <tr> <td colspan="3" style="height: 10px;"></td> </tr> <tr> <td>5c.</td> <td>\$</td> <td style="text-align: right; border: 1px solid black; padding: 5px;">416,051.06</td> </tr> </table>	5a.	\$	23,472.65	5b.	+	392,578.41				5c.	\$	416,051.06
5a.	\$	23,472.65											
5b.	+	392,578.41											
5c.	\$	416,051.06											

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name **3DH Hospitality, LLC**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1.	State what the contract or lease is for and the nature of the debtor's interest	Workers Compensation insurance and Employers Liability insurance policy.	
	State the term remaining	8 months (est.)	
	List the contract number of any government contract		Accident Fund P.O. Box 40790 Lansing, MI 48901
2.2.	State what the contract or lease is for and the nature of the debtor's interest	Credit card processing service agreement.	
	State the term remaining	11 months (est.)	
	List the contract number of any government contract	Unknown	Eventbrite, Inc. 95th Third Street, 2nd Floor San Francisco, CA 94103
2.3.	State what the contract or lease is for and the nature of the debtor's interest	Lease for 1000 N. Rohlwing Road, Suite 13, Lombard, IL	
	State the term remaining	9-30-27	
	List the contract number of any government contract	N/A	Inland Property Mngt 2901 Butterfield Road Oak Brook, IL 60523
2.4.	State what the contract or lease is for and the nature of the debtor's interest	Asset purchase agreement, bill of sale, and assignment of rights for the business Brauer House Bar and Grill and B-House Live.	
	State the term remaining	10 months to 32.50 months	
	List the contract number of any government contract	N/A	SBBL, LLC 600 E. View Lombard, IL 60148

Debtor 1 **3DH Hospitality, LLC**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest

Commercial General Liability, Liquor, and Umbrella insurance policy. Provided by Acord (insurance producer is Southpoint Insurance Agency, Inc.).

State the term remaining

8 months (est.)

List the contract number of any government contract

**Specialty Risk of America
P.O. Box 959220
Saint Louis, MO 63195**

Fill in this information to identify the case:

Debtor name 3DH Hospitality, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Carolina Diaz 1008 S. Harvard Ave.
Addison, IL 60101

Inland Property Mngt

☐ D _____
☒ E/F 3.13
☐ G _____

2.2 Carolina Diaz 1008 S. Harvard Ave.
Addison, IL 60101

WebBank

☒ D 2.2
☐ E/F _____
☐ G _____

2.3 Carolina Diaz 1008 S. Harvard Ave.
Addison, IL 60101

Inland Property Mngt

☐ D _____
☐ E/F _____
☒ G 2.3

Fill in this information to identify the case:

Debtor name 3DH Hospitality, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2024 to Filing Date

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$275,884.20

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. WebBank c/o Toast Capital 401 Park Drive, Suite 801 Boston, MA 02215	Various payments (burndown) from 3-28-24 to 4-26-24.	\$6,754.19	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.2. SBBL, LLC 600 E. View Lombard, IL 60148	Five payments from 3-3-24 to 4-23-24	\$8,224.97	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-26-24	\$3,059.20	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.4. Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794	5-2-24	\$1,626.98	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.5. IDES P.O. Box 4385 Chicago, IL 60680	4-12-24	\$2,987.81	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.6. Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-11-24	\$3,230.84	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.7. Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794	4-4-24	\$1,960.08	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.8. Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-4-24	\$3,346.38	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.
3.9. Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-4-24	\$3,207.28	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Taxes owed.

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.10 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-3-24	\$3,739.38	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>
3.11 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	4-3-24	\$121.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>
3.12 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	3-18-24	\$3,678.60	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>
3.13 Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794	3-11-24	\$1,689.47	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>
3.14 Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794	3-20-24	\$7,265.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>
3.15 IDES P.O. Box 4385 Chicago, IL 60680	1-10-24	\$486.63	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Taxes owed.</u>

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
Various fruits, vegetables, meats, cheese, and dairy liquids. Items are perishable in nature.	N/A	Sometime in late April / May 2024.	Unknown

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Firas Law, LLC 18927 Hickory Creek Drive, Suite 115 Mokena, IL 60448		On or about May 7, 2024.	\$4,500.00
	Email or website address			
	Who made the payment, if not debtor? Maricela Diaz			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	Inland Property Management & Leasing Group 2901 Butterfield Road Oak Brook, IL 60523	Security deposit held by Inland Property Management in the amount of \$15,379.15 (lease for 1000 N. Rohlwing Road, Suite 13, Lombard, IL). Initial deposit was made on or about December 21, 2023, and may be deducted by the landlord for past due rent.	On or about 12-21-23.	\$15,379.15
	Relationship to debtor Landlord / Tenant			
13.2	Various Customers	Refunds to various customers for future events that were cancelled (via Eventbrite). Funds were not transferred to the Debtor's account.		Unknown
	Relationship to debtor Various Customers			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Debtor **3DH Hospitality, LLC**

Case number (if known)

Address

Dates of occupancy
From-To

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
☒ Yes. State the nature of the information collected and retained.

Customer names and email addresses are collected when tickets for live events are purchased by and through Eventbrite.com.

Does the debtor have a privacy policy about that information?

- ☐ No
☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Does debtor still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Does debtor still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☐ No.

☐ Yes. Provide details below.

Case title
Case number

Court or agency name and address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☐ No.

☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

☐ No.

☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26a.1.	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	Since 2-2024 to current.
26a.2.	Edree M. Olson Accounting 4 U 1749 Vantage Drive Shorewood, IL 60404	Since 2-2024 to current.

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	Village of Lombard 255 E Wilson Avenue Lombard, IL 60148
26d.2.	Inland Property Mngt 2901 Butterfield Road Oak Brook, IL 60523

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
--	-------------------	---

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Carolina Diaz	1008 S. Harvard Ave. Addison, IL 60101	Manager	100

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$7,000.00	2-5-24	Transferred to personal account and applied to the deposit paid to Inland for the rent deposit, totalling \$15,379.15 (posted 2-6-24).
	Relationship to debtor Manager			
30.2	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$10,000.00	2-5-24	Transferred to personal account and applied to the deposit paid to Inland for the rent deposit, totalling \$15,379.15 (posted 2-6-24).
	Relationship to debtor Manager			
30.3	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$1,200.00	2-15-24	Transferred to personal account and paid for bands performing (entertainment) and beer. Payments made with the checks from personal account.
	Relationship to debtor Manager			
30.4	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$2,222.00	2-17-24	Transferred funds back to business account.
	Relationship to debtor Manager			

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.5	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$100.00	2-17-24.	Draw.
	Relationship to debtor Manager			
30.6	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$993.20	2-21-24	Draw.
	Relationship to debtor Manager			
30.7	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$900.00	2-26-24	Draw.
	Relationship to debtor Manager			
30.8	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$1,500.00	2-29-24	Draw.
	Relationship to debtor Manager			
30.9	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$16,000.00	3-11-24	Transferred funds to personal account and paid to Inland for rent, totalling \$15,379.15 (posted 3-11-24 in personal checking account).
	Relationship to debtor Manager			
30.10	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$300.00	3-22-24	Draw.
	Relationship to debtor Manager			
30.11	Carolina Diaz 1008 S. Harvard Ave. Addison, IL 60101	\$2,000.00	4-12-24	Transferred funds back to business account.
	Relationship to debtor Manager			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

Debtor **3DH Hospitality, LLC**

Case number (if known) _____

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 18, 2024**

/s/ Carolina Diaz

Signature of individual signing on behalf of the debtor

Carolina Diaz

Printed name

Position or relationship to debtor **Manager**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Northern District of Illinois**

In re **3DH Hospitality, LLC**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	4,500.00
Prior to the filing of this statement I have received	\$	4,500.00
Balance Due	\$	0.00

2. \$ **0.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): **Maricela Diaz (sister)**

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtor(s) in any dischargeability actions, judicial lien avoidances, relief from stay actions, or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 18, 2024

Date

/s/ Firas M. Abunada

Firas M. Abunada

Signature of Attorney

Firas Law, LLC

18927 Hickory Creek Drive, Suite 115

Mokena, IL 60448

815-450-9340

fma@firaslaw.com

Name of law firm

**United States Bankruptcy Court
Northern District of Illinois**

In re **3DH Hospitality, LLC** Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **79**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **June 18, 2024**

/s/ Carolina Diaz
Carolina Diaz/Manager
Signer/Title

Abarr
8130 W. 47th St.
Lyons, IL 60534

Accident Fund
P.O. Box 40790
Lansing, MI 48901

Accident Fund
P.O. Box 40790
Lansing, MI 48901

Adella Harden
2277 S Grove St Apt 221 Bldg 200
Ypsilanti, MI 48198

Alan Caliendo
808 S. Fairfield
Lombard, IL 60148

Alberto Diaz
3516 Saint Paul Ave
Bellwood, IL 60104

Alesa Mueller
610 State Street St.
Saint Charles, IL 60174

Alsco
2641 S Leavitt Street
Chicago, IL 60608

Amy Stevens
1314 Kensington Road, Unit 3482
Hinsdale, IL 60522

Anna Luciano
258 W Parkview Dr.
Addison, IL 60101

Ariel Muersch
15556 W 151st St.
Homer Glen, IL 60491

Ava Dill
2840 N 73rd Court, Unit Basement
Elmwood Park, IL 60707

Breakthru Beverage
P. O. Box 809180
Chicago, IL 60680

Breana Lesser
529 N. Indiana St.
Elmhurst, IL 60126

Brian Gordan
1133 S. Finley Rd., #403
Lombard, IL 60148

Brittany Rocha
707 N. Kenilworth
Elmhurst, IL 60126

Capital One
P.O. Box 31293
Salt Lake City, UT 84131

Carolina Diaz
1008 S. Harvard Ave.
Addison, IL 60101

Carolina Diaz
1008 S. Harvard Ave.
Addison, IL 60101

Carolina Diaz
1008 S. Harvard Ave.
Addison, IL 60101

Christina Kaplan
617 Plum Grove Rd., 2B
Roselle, IL 60172

Clara Diaz
412 E. LeMoyne Street
Melrose Park, IL 60164

Comcast
1701 John F. Kennedy Boulevard
Philadelphia, PA 19101

Comcast
P.O. Box 809180
Chicago, IL 60680

ComEd
P.O. Box 805379
Chicago, IL 60680

ComEd
P.O. Box 6111
Carol Stream, IL 60197

Corinne Dyrda
21W549 North Ave #236
Lombard, IL 60148

Edree Olson
1749 Vantage Drive
Shorewood, IL 60404

Elizabeth Bray
890 Sheldon Ct., Unit A
Wheaton, IL 60189

Eventbrite, Inc.
95th Third Street, 2nd Floor
San Francisco, CA 94103

Eventbrite, Inc.
95th Third Street, 2nd Floor
San Francisco, CA 94103

Gina Ligeikis
0138 W. Medill Ave.
Melrose Park, IL 60164

Halley Kenyon
547 S. Oakland Ave.
Villa Park, IL 60181

Harvey Harden
816 Karen Drive
Cassville, GA 30123

IDES
Benefit Payment Control Division
P.O. Box 4385
Chicago, IL 60680

IDES
P.O. Box 19300
Springfield, IL 62794

Illinois Department of Revenue
P.O. Box 19035
Springfield, IL 62794

Inland Property Mngt
2901 Butterfield Road
Oak Brook, IL 60523

Inland Property Mngt
2901 Butterfield Road
Oak Brook, IL 60523

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101

Internal Revenue Service
1220 SW 3rd Ave., Ste. G044 M/S0175
Fairview, OR 97024

Jairam Navarez
1450 N First Ave., #4
Addison, IL 60101

John Bravo
12443 S. Honore St.
Riverdale, IL 60827

Julian Hernandez
1008 S. Harvard Ave.
Addison, IL 60101

Kevin Cuthbertson
701 W. Sunset Ave.
Villa Park, IL 60181

Kevin Tierney
672 Hearth Ln., #206
Carol Stream, IL 60188

Kresta Ortega
270 Paddock Circle
Glendale Heights, IL 60139

Lisa Pool
4751 St. Joseph Creek, Apt. 104
Chicago, IL 60632

Manuel Uribe
1441 N. 9th Ave.
Addison, IL 60101

Maricela Diaz
412 E. LeMoyne Street
Melrose Park, IL 60164

Nick Cortese
3880 Wehrman Ave.
Schiller Park, IL 60176

Nicor Gas
P.O. Box 5407
Carol Stream, IL 60197

Nicor Gas
P.O. Box 0632
Aurora, IL 60507

Pete Tlatenchi
320 27th Avenue
Melrose Park, IL 60164

Rafael Zamora
735 E Irving Park Rd., Unit E
Roselle, IL 60172

Ray Zukowski
531 W. Pleasant Lane, #2
Lombard, IL 60148

Salvador Diaz
412 E. LeMoyne Street
Melrose Park, IL 60164

Samantha Surges
442 San Carlos Rd.
Minooka, IL 60447

Sarah Sitko
1521 Commodore Ct., #1
Schaumburg, IL 60193

SBBL, LLC
600 E. View
Lombard, IL 60148

SBBL, LLC
258 Parkview Drive
Addison, IL 60101

SBBL, LLC
600 E. View
Lombard, IL 60148

Sean Fennessy
860 Foxworth Blvd., #111
Lombard, IL 60148

Southern Glazer Wine & Spirits
2971 Collection Center Dr.
Chicago, IL 60693

Southpoint Insurance
15341 S 94th Ave., Ste 100
Orland Park, IL 60462

Specialty Risk of America
P.O. Box 959220
Saint Louis, MO 63195

Specialty Risk of America
P.O. Box 959220
Saint Louis, MO 63195

Stacey Lynch Law, Inc.
16357 Olcott Ave.
Tinley Park, IL 60477

Timothy Zak
470 Fawell Blvd., #310
Glen Ellyn, IL 60137

Trina Medley
1016 S. Edson Ave.
Lombard, IL 60148

Village of Lombard
255 E. Wilson Avenue
Lombard, IL 60148

Village of Lombard
255 E. Wilson Avenue
Lombard, IL 60148

Village of Lombard
255 E. Wilson Avenue
Lombard, IL 60148

Vincent Cusiamo
c/o Edree Olson Accounting 4 U
1749 Vantage Drive
Chicago, IL 60604

WebBank
c/o Toast Capital
401 Park Drive, Suite 801
Boston, MA 02215

WebBank
c/o Toast Capital
215 South State Street, Suite 100
Salt Lake City, UT 84111

Whittingham Meats
4134 W 127th Street
Alsip, IL 60803

Wilfredo Bravo
3420 W. North Ave.
Chicago, IL 60647

Yoana Tierney
672 Hearth Ln., #206
Carol Stream, IL 60188

**United States Bankruptcy Court
Northern District of Illinois**

In re **3DH Hospitality, LLC**

Debtor(s)

Case No.
Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **3DH Hospitality, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

Carolina Diaz
1008 S. Harvard Ave.
Addison, IL 60101

☐ None [*Check if applicable*]

June 18, 2024

Date

/s/ Firas M. Abunada

Firas M. Abunada

Signature of Attorney or Litigant
Counsel for **3DH Hospitality, LLC**
Firas Law, LLC
18927 Hickory Creek Drive, Suite 115
Mokena, IL 60448
815-450-9340
fma@firaslaw.com